



SYRIA SHRINERS

KNIGHTS OF MECCA

Membership Application

Please print your information

Name _____ Date of Birth _____

Address _____ Phone _____

_____ Cell _____

Email _____

Shrine # _____ Wife's Name _____

I hereby certify that I am a Past Master, by serving at least one year as Worshipful Master of

_____ Lodge No. _____

Located in _____

City State

Year you were Master _____

Recommender _____ KOM # _____

Send application and check for \$75 for lifetime membership, made payable to Knights of Mecca, to:

Austin Shifrin

1420 Centre Ave, apt #2017

Pittsburgh, PA 15219